# MFCC ORAL EXAMINATION CANDIDATE HANDBOOK

# State of California Department of Consumer Affairs BOARD OF BEHAVIORAL SCIENCES

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# 1. OVERVIEW OF CALIFORNIA'S LICENSING PROGRAM

# Description of Practice

Section 4980.02 of the California Business and Professions Code defines marriage, family, and child counseling practice as:

"... service performed with individuals, couples, or groups wherein interpersonal relationships are examined for the purpose of achieving more adequate, satisfying, and productive marriage and family adjustments. This practice includes relationship and premarriage counseling.

The applications of marriage, family, and child counseling principles and methods includes, but is not limited to, the use of applied psychotherapeutic techniques, to enable individuals to mature and grow within marriage and the family, and the provision of explanations and interpretations of the psychosexual and psychosocial aspects of relationships."

# Intent of the License

A licensed marriage, family, and child counselor (MFCC) may deliver direct counseling services as an independent practitioner. An independent practitioner is defined as a person who has sufficient academic training and experience to practice without supervision.

# The Examination Program

The Board of Behavioral Sciences' (Board's) examinations are developed with assistance from the Department of Consumer Affairs' Office of Examination Resources. Its staff consists of test validation and development specialists who are trained to develop and analyze occupational licensing examinations.

For an examination to be valid, its development must involve MFCCs currently in the profession. The Board requires those who assist with examination development, known as Subject Matter Experts (SMEs), to possess a license which is current and not under suspension or probation, and a degree named in 4980.40(a) of the Business and Professions Code. SMEs are also required to practice as an MFCC for minimum of 20 weekly hours which includes training, supervision, education, or clinical experience, and a minimum of 10 weekly hours of face-to-face counseling.

# Occupational Analysis

Examination development begins with an occupational analysis, which was most recently performed for MFCCs in 1997. The purpose of an occupational analysis is to define current MFCC practice. This information forms the basis for the licensing examinations.

The occupational analysis began with interviews of MFCCs to obtain information about the tasks that are performed in independent practice, and the types of knowledge required to perform those tasks. MFCCs were interviewed throughout the state of California, and were selected on the basis of geographical location, length of practice, and diversity.

Next, workshops were conducted with SMEs to review the task and knowledge statements obtained from the interviews, and incorporate them into a survey. The survey asked MFCCs to rate each task and knowledge statement as it applied to their own practice. The ratings pertained to the frequency and importance of each task.

The survey was mailed to 2,000 MFCCs throughout California. A workshop was conducted to review the results of the survey data and to determine the content of the new examination outline. Workshop participants then determined whether the outline contained tasks and/or knowledge areas that could not be adequately tested in a written examination format. These task statements and knowledge areas formed the oral examination outline, presented in Chapter 7 of this handbook.

# Oral Examination Development

Based on the results of the 1997 occupational analysis, the oral examination was redeveloped. This process consisted of workshops with MFCCs to determine content areas and to create new standardized questions, rating scales, behavioral anchors, and vignettes.

#### **Oral Examiners**

In order for the oral examination to be valid, candidates are tested and rated by MFCCs. The Board requires MFCC oral examiners to possess a license for three years which is current and not under suspension or probation, and a degree named in 4980.40(a) of the Business and Professions Code. Oral Examiners are also required to practice as an MFCC for a minimum of 20 weekly hours which includes training, supervision, education, or clinical experience, and a minimum of 10 weekly hours face-to-face counseling.

## **Chapter 1: Overview of California's Licensing Program**

examiner, the MFCC is interviewed by a lead oral examiner.

If the MFCC is selected, he or she is required to attend an 8-hour training session prior to serving as an oral examiner. Returning oral examiners are required to attend a 4-hour training session prior to each oral examination. There are two sets of oral examinations given per year.

Oral examiners are trained to present a pleasant, business-like demeanor to candidates. Oral examiner performance is closely monitored by the Board through lead oral examiners who review information on site at the examinations and through the oral examination appeal process. The Board also obtains information about examiner performance through statistical analyses of examiner reliability, and through an anonymous candidate questionnaire. In September 1997, 1,193 candidates were examined. Of the 1,161 candidates who completed the questionnaire, 99% said their examiners acted professionally.

# Lead Oral Examiners

Lead oral examiners assist the Board in hiring and training oral examiners, and monitoring their performance. Lead oral examiners are MFCCs who are hired based on their history as an oral examiner and their ability to supervise and teach others.

## 2. PURPOSE OF THE ORAL EXAMINATION

#### **State Mandate**

State licensing boards are mandated to protect the public by developing licensing examinations that determine entry-level competency for those who wish to provide independent professional services to the consumer. These examinations require candidates to demonstrate that they possess the minimum skills and abilities that the professional community has deemed necessary to perform safely and effectively in independent practice, without supervision.

# Purpose of Oral Examinations

The purpose of an oral examination is to assess job-related knowledge and skills that cannot be assessed in any other format. Oral examinations are a necessary requirement for professions that require practitioners to interact verbally with clients, assess a problem in real time (for which additional research or consultation is not usually available), and solve problems that pose an immediate threat to the safety or welfare of the public.

# Purpose of the MFCC Oral Examination

The purpose of the MFCC oral examination is to permit observation and evaluation of a candidate's ability to provide safe and effective marriage, family, and child counseling services to the consumer. The nature of independent practice requires that an individual be able to demonstrate the ability to maintain boundaries, and the ability to integrate and apply knowledge, interactive skills, and values to diverse clinical situations. These are necessary cognitive skills that are not effectively tested in a written examination.

# 3. PREPARING FOR THE ORAL EXAMINATION

# How to Use This Handbook

This handbook is designed to give candidates the opportunity to fully understand the oral examination process and know what to expect during the oral examination. This handbook contains a study guide which presents the oral examination outline, a summary of the questions that will be asked in each content area, a summary of the standardized rating scales, a sample vignette, and "pointers" for candidates. This information has been presented in a format that is designed to enable the candidate to effectively prepare for the oral examination.

# Suggestions for Candidates

The oral examination questions were designed to be as direct as possible, and there are no "hidden" meanings to any of them. A summary of the oral examination questions is provided in Chapter 7 of this handbook.

Examination coaching is not necessary in order to be successful in the oral examination, and coaching is not a substitute for education and experience. However, coaching may be useful for overcoming test anxiety.

Candidates are encouraged to use their clinical experience and to trust their clinical judgment as a basis for answering the oral examination questions, rather than relying on memorized lists of information.

# 4. ORAL EXAMINATION OUTLINE

#### **Content Areas**

The oral examination is structured into the seven ontent areas listed below. Each content area is equally weighted in the oral examination.

# **CONTENT AREAS**

I. Clinical Evaluation

II. Crisis Management

III. Treatment Plan

IV. Treatment

V. Human Diversity

VI. Law

VII. Ethics

# Basis of the Oral Examination Outline

The *oral examination outling* presented in Chapter 7 of this handbook, is based on the results of the occupational analysis. The outline gives a definition and description of each content area, a summary of the questions that will be asked of candidates in each content area, and the tasks and types of knowledge that may be tested in each content area. These tasks and knowledge areas are those that were determined by the profession that newly licensed practitioners are expected to perform.

## Task and Knowledge Statements

The task and knowledge statements listed in each content area form the basis of the oral examination outline. Each task and knowledge statement is listed only once, in one content area, although some of the task and knowledge statements could apply to other content areas. Subject matter experts determined the placement of each of the statements into the content areas.

The task and knowledge statements in the oral examination outline are a result of the occupational analysis. In the occupational analysis, a particular task and knowledge statement had to be rated important by survey participants to be included in either the written or the oral examination outline. The oral examination outline only consists of those task and knowledge statements that were unable to be tested in any format other than an oral examination.

Not all task statements or knowledge areas listed in the oral examination outline will be tested in every candidate's oral examination. The tasks and types of knowledge tested will depend on the randomly assigned oral examination vignette. Candidates should be prepared to be tested on any of the tasks or knowledge areas listed in the outline. However, candidates are only expected to address those that pertain to the assigned vignette.

## 5. OVERVIEW OF THE ORAL EXAMINATION

# Overall Structure

The structure of the oral examination is standardized to permit examiners to assess a candidate's knowledge and experience in an unbiased and objective way. All candidates are given the opportunity to apply integrated professional knowledge and skills to the diverse clinical situations presented in the oral examination vignettes. The candidate's responses to the standardized questions are evaluated with a clearly defined set of standardized rating scales presented in Chapter 7 of this handbook.

## Basis of the Examination

Oral examination vignettes are designed to emphasize particular therapeutic issues, and toelicit demonstration of a candidate's ability to integrate and apply professional knowledge, interactive skills, and values to diverse clinical situations. The vignette allows candidates to demonstrate clinical skills as an independent practitioner would.

# Theoretical Models

The integration and application of knowledge of clinical marriage, family, and child counseling practice with interactive skills and values does not subscribe to any single theory. Candidates are, however, expected to correctly apply a chosen theoretical model consistent with the clinical issues presented in the oral examination vignette.

# Standardized Examination Protocol

There are specific standardized questions for each of the seven content areas in the oral examination outline. Each candidate is given the same opportunity to read a vignette and respond to the standardized questions. All candidates are assessed under equal and fair conditions.

All candidates are asked the same set of questions and are evaluated based on responses to the questions in each content area.

The standardized questions were developed based on the oral examination outline, and are designed to consistently and reliably assess a candidate's ability to function as an independent practitioner.

## 6. EVALUATION SYSTEM

# Standardized Evaluation System

A standardized system for evaluating a candidate's responses to standardized examination questions ensures that all candidates are evaluated under similar conditions. This system provides a structure which enables examiners to assign consistent ratings based on a candidate's individual performance.

All candidates are independently rated by the examiners. Examiners are specifically instructed not to discuss the performance of any candidate with anyone, including fellow examiners.

Each content area in the oral examination outline has its own set of behaviorally anchored rating scales. A candidate is rated in terms of observable behaviors that an examiner can readily identify and, therefore, reliably rate. Instead of determining whether a candidate passes or fails a question, an examiner determines which of the following ratings describes the candidate's performance in each content area. Descriptions and point values for each content area are presented on the following pages.

# DESCRIPTION OF RATINGS

RATING	DESCRIPTION
EXCEPTIONAL	subtle, integrated, complex, sophisticated, comprehensive, insightful, creative
SKILLED	complete, inclusive, thorough, in-depth, confident
SUFFICIENT	consistent, relevant, basic, sound, realistic, accurate, appropriate, essential
DEFICIENT	vague, superficial, incomplete, irrelevant, jargon
Unqualified	confused, omissive, incorrect, lacking skill, inexperience, insufficient, erroneous, contrary
VERY UNQUALIFIED	harmful, dangerous to client, discredit to profession unprofessional

### **Scoring**

The candidate's score in each content area is the average of the points assigned by each examiner for that content area. For example, if the candidate receives a rating of Skilled (4 points) from examiner one and Deficient (2 points) from examiner two, the average number of points for that content area is 3 points. In other words, (4+2=6)+2=3.

A candidate's final score for the oral examination is the average of the total points assigned by each examiner. A candidate can earn a maximum of 35 points in the oral examination. The points are weighted equally into seven content areas as shown below.

	POINTS WEIGHTED BY CO	NTENT AREA
I.	Clinical Evaluation	5 points
II.	Crisis Management	5 points
III.	Treatment Plan	5 points
IV.	Treatment	5 points
V.	Human Diversity	5 points
VI.	Law	5 points
VII	. Ethics	5 points
	MAXIMUM TOTAL SCORE:	35 POINTS

#### **Passing Score**

To obtain a passing score of 21 points, or 60%, a candidate must earn an average rating of Sufficient, or 3 points, in each content area. Note that a candidate may compensate for a low score in one area with a high score in another area.

The passing score of 21 points is lowered by the standard error of measurement that is calculated for each oral examination cycle. The standard error of measurement is based on the overall reliability of the examination. Therefore, there may be a slight variation in the passing score from one examination cycle to another, but a score of 21 is always sufficient to pass.

# 7. ORAL EXAMINATION STUDY GUIDE

### What to Study

The information presented in this chapter consists of:

- The oral examination outline, discussed in detail in Chapter 4;
- A summary of the standardized questions in each content area;
- A summary of the behavioral anchors in the evaluation system for each content area, discussed in detail in Chapter 6;
- A sample vignette; and,
- "Pointers" regarding the vignette, standardized questions, and candidate responses.

Candidates are encouraged to use this information as a study guide for the MFCC oral examination.

# Oral Examination "Pointers" for Candidates

### **Keep the following points in mind during your examination:**

- You will be asked to read the vignette aloud and will then have seven minutes for review and note-taking.
- Your examiners may ask you to reread the vignette aloud if they believe you misread the vignette.
- You will be asked the same set of standardized questions as the other candidates.
- You will have approximately 30 minutes to answer the set of standardized questions. Use your time wisely.
- Examiners may take extensive notes during the examination.
- Because each oral examination question is different, it is not necessary to spend the same amount of time answering each question.

- Your response to each standardized question should directly address the content of the question as it relates to the vignette.
- It is important to keep your answers brief, vignette-specific, and directly related to the question asked. In order to maintain the examination's standardized time frame, one of the examiners may say "thank you" to indicate the need to move on to the next question.
- All candidates will be asked all of the standardized questions in the same order, even if an answer has been previously provided by the candidate. One of the examiners may tell you, "You may have touched upon this area before..." prior to asking a question order to maintain a standardized examination. If this occurs, you are expected to repeat and possibly expand upon your previous answer.
- Candidates will receive credit for correct answers whether mentioned in response to a question in the pertinent content area or not. For example, if a candidate forgets to mention something in response to one of the questions, but remembers later while answering a different question, the candidate will be credited for that information under the pertinent content area.
- In accordance with standardized examination protocol, the examiners **may not** rephrase a standardized question, but may repeat it.
- Candidates are to refrain from mentioning any personal information to their examiners.

### **Sample Vignette**

Vignettes are randomly assigned to each candidat@he following sample vignette, similar to those used in the oral examination, demonstrates the style, approximate length, content, and structure of a vignette. The vignette assigned at the examination site will be printed in large type, 24 point font.

## SAMPLE VIGNETTE

Judy, a 42-year-old divorcee, and her adopted 16-year-old son, Sam, have been referred by the probation department following Sam's involvement in a series of petty thefts. Judy states, "Sam has always been difficult but is getting worse." She reports that she can't sleep at night because she is so worried about him. She wishes he would be more like her 15-year-old daughter, Susie. Judy says, "Sam is ruining our lives. I can't trust him. He stays out all night and always rude and disrespectful to us." Sam complains that his mother is unfair and always favors his sister. He says, "She hates me because my real mom was a drug addict. I wish I w never born. She just thinks Susie is perfect because she's her real child -- not adopted like me."

MFCC Oral Examination Outline and Summaries of Standardized Questions and Behavioral Anchors The full MFCC oral examination outline and the summaries of standardized questions and behavioral anchors of the evaluation system are presented on the following pages.

The summaries of standardized questions and behavioral anchors are provided as **examples** of what candidates should expect in the oral examination.

#### MFCC Oral Examination Outlin Content Area I

# **CLINICAL EVALUATION**

#### **DESCRIPTION**

This area assesses the candidate's ability to identify presenting problems and collect information in order to assess relevant clinical issues and formulate a diagnostic impression.



#### **DEFINITION**

The candidate assesses relevant clinical issues in the vignette by evaluating the client's history and presentation, using additional resource information, and considering client's capacity to benefit from the therapeutic process. The candidate formulates a diagnostic impression by integrating assessment information in the vignette.

### TASKS KNOWLEDGE OF:

- Identify presenting problems by assessing major issues involved to determine client's purpose for seeking therapy
- ◆ Identify unit of treatment (individual, couple, family) by evaluating the presenting problems to determine a strategy for therapy
- ◆ Assess social adjustment by evaluating intrapersonal and interpersonal dynamics to identify patterns of behavior
- ◆ Identify possible substance abuse by assessing verbal and nonverbal indicators from client or other therapy participants to plan for treatment
- ◆ Formulate a diagnostic impression based on assessment information to use as a basis for treatment planning
- Assess client's functioning level to determine the need for adjunctive evaluation

- ♦ Framework for initial intake questioning
- ♦ Strategies to establish a safe environment
- ♦ Factors influencing the choice of unit of treatment based on the presenting problem
- ♦ Strategies to gather information from adjunctive resources
- ♦ Diagnostic and Statistical Manual criteria for determining diagnoses
- ♦ Dynamics of a chemically-dependent family
- Methods to assess client strengths and coping skills
- ♦ Procedures to integrate assessment information with diagnostic categories
- ♦ Strategies to determine prognosis
- ♦ Theoretical models applicable to presenting problem

## **SUMMARY OF STANDARDIZED QUESTIONS**

Questions will be asked regarding clinical assessment and diagnostic impressions of the case presented in the vignette.

# Summary of Evaluation System Behavioral Anchors I. CLINICAL EVALUATION

RATING	DESCRIPTION OF CANDIDATE'S RESPONSE	POINTS
EXCEPTIONAL	<ul> <li>assesses and identifies subtle therapeutic concerns</li> <li>integrates diagnostic impressions from several theoretical perspectives</li> </ul>	5
SKILLED	<ul> <li>gathers breadth of relevant information through a variety of techniques</li> <li>describes rationale for arriving at diagnostic impressions</li> <li>demonstrates an understanding of implications for presenting problems</li> </ul>	4
SUFFICIENT	<ul> <li>identifies and prioritizes critical therapeutic concerns</li> <li>supports clinical impressions</li> <li>formulates a realistic diagnostic impression</li> </ul>	3
DEFICIENT	<ul> <li>forms clinical impressions without including case information presented in vignette</li> <li>makes superficial or incomplete diagnoses</li> </ul>	2
UNQUALIFIED	<ul> <li>makes incorrect or insufficient assessment and/or diagnosis</li> <li>makes assessments contrary to supporting evidence</li> <li>forms clinical impressions not relevant to the case</li> </ul>	1
VERY UNQUALIFIED	<ul> <li>makes decisions or omissions that endanger client or others</li> <li>misuses assessment tools in a way that is harmful or dangerous to client</li> </ul>	0

#### MFCC Oral Examination Outline Content Area II

# **CRISIS MANAGEMENT**

#### **DESCRIPTION**

This area assesses the candidate's ability to identify, evaluate, and manage crisis situations.



#### **DEFINITION**

The candidate uses information from the vignette to recognize past, present, or future situations that pose a threat or danger to self or others, in order to determine severity of crises. The candidate manages crises in the vignette by implementing a plan for safety and resolution.

#### **TASKS KNOWLEDGE OF:** • Observe client for physical indications of abuse to determine High risk factors for suicidality reporting requirements and treatment strategies High risk factors for violent or • Evaluate potential for self-destructive behavior by assessing aggressive behavior client's emotional state Techniques to evaluate plan, means, • Assess potential for danger to others by evaluating violent or and intent for dangerous behavior aggressive behaviors and level of impulse control Strategies to deal with assaultive or ♦ Identify nature of crisis to determine what immediate action is aggressive client needed Techniques for anger management • Establish a contract with client who is in imminent danger to Procedures for managing outpatient reduce the potential for harm to self suicidal ideation not requiring • Develop a plan with client who has indicated thoughts of hospitalization causing harm to others to reduce the potential for danger Strategies for dealing with dangerous • Develop a plan with client in a potentially abusive situation to clients provide for the safety of client and other family members Techniques to identify crisis situations • Assist traumatized client to return to pre-morbid level of Directive approaches for dealing with

#### **SUMMARY OF STANDARDIZED QUESTIONS**

crisis situations

functioning by identifying how current thoughts, behaviors,

and emotions may be distorted by the traumatic event

Questions will be asked regarding identification, severity level, and clinical management of crisis issues in the case presented in the vignette.

# Summary of Evaluation System Behavioral Anchors II. CRISIS MANAGEMENT

RATING	DESCRIPTION OF CANDIDATE'S RESPONSE	POINTS
EXCEPTIONAL	<ul> <li>integrates crisis management interventions into long-term treatment goals</li> <li>demonstrates a comprehensive understanding of the dynamics or crisis issues</li> <li>performs sophisticated assessment of severity of crisis issues</li> </ul>	<b>5</b>
SKILLED	<ul> <li>manages crisis situations throughout the course of treatment</li> <li>demonstrates thorough understanding of crisis issues</li> <li>provides in-depth assessment of severity of crisis issues</li> </ul>	4
SUFFICIENT	<ul> <li>identifies and responds to ongoing crisis situations relevant to the case</li> <li>demonstrates basic clinical management of crisis issues</li> <li>demonstrates an accurate evaluation of the severity of a crisis situation</li> </ul>	3
DEFICIENT	<ul> <li>handles crisis situations in superficial or limited manner</li> <li>performs incomplete assessment of crisis issues</li> <li>presents crisis issues irrelevant to the case</li> </ul>	2
UNQUALIFIED	<ul> <li>mismanages crises in case</li> <li>performs erroneous assessment of crisis issues</li> </ul>	1
VERY UNQUALIFIED	<ul> <li>puts clients at risk by mismanaging crisis situations</li> <li>demonstrates incompetent assessment of crisis issues, putting the client at risk</li> </ul>	0

#### MFCC Oral Examination Outline Content Area III

# TREATMENT PLAN

#### **DESCRIPTION**

This area assesses the candidate's ability to develop a treatment plan from preliminary assessments and provisional diagnoses. The candidate demonstrates this ability within a theoretical model consistent with clinica issues.



#### **DEFINITION**

The candidate considers short-, intermediate-, and long-term goals and provides a structure for the course of treatment using a theoretical model applicable to the presenting problems in the vignette.

#### **TASKS KNOWLEDGE OF:** ♦ Identify primary goal of therapy based on Timing of interventions based on phase of therapy clinical evaluation Disorder-specific techniques and interventions • Formulate a treatment plan within a Strategies to assess therapeutic progress theoretical framework to provide a Methods to formulate short- and long-term treatment goals structure for therapy Transference and countertransference issues • Determine the need for referral for Developmental stages adjunctive services to augment therapy Conscious and unconscious processes ♦ Apply an insight approach to therapy to Strategies to manage resistance determine the interrelationship between Client-centered approach to promote client's growth past events and current behaviors Methods of behavioral contracting • Apply an interactive approach to therapy Systemic problem-solving techniques to develop a therapeutic partnership Strategies to modify irrational beliefs ♦ Apply a problem solving approach to Techniques of positive and negative reinforcement therapy to focus on the problem in the Principles of systems theory present Structural techniques to modify dysfunctional interactions ♦ Apply a systems approach in therapy to Roles and interactions among subsystems demonstrate how family dynamics Application of systems techniques to establish a therapeutic contribute to the presenting problem alliance

### **SUMMARY OF STANDARDIZED QUESTIONS**

Questions will be asked regarding application of theory and amplete treatment plan including referrals for the case presented in the vignette, after the crises in the case have been stabilized.

# Summary of Evaluation System Behavioral Anchors III. TREATMENT PLAN

RATING	DESCRIPTION OF CANDIDATE'S RESPONSE	POINTS
EXCEPTIONAL	<ul> <li>demonstrates sophisticated understanding of integration of theory and treatment plan</li> <li>assesses comprehensive, collaborative treatment goals on an ongoing basis</li> <li>implements treatment plan customized to unique factors in case</li> </ul>	5
SKILLED	<ul> <li>demonstrates the rationale of theory applied to the case</li> <li>demonstrates and applies a comprehensive knowledge of theoretical approach</li> <li>presents an in-depth knowledge of the progression of therapy</li> <li>demonstrates specificity and timing in use of referral</li> </ul>	4
SUFFICIENT	<ul> <li>demonstrates an ability to apply chosen theoretical model to the case</li> <li>discusses treatment plan with beginning, middle, and ending phases</li> <li>identifies unit of treatment</li> <li>makes referral based on client need and circumstances</li> </ul>	3
DEFICIENT	<ul> <li>applies theoretical model inconsistently, superficially, and/or unrealistically</li> <li>develops incomplete treatment plan</li> <li>makes referral irrelevant to the case or without clinical indications</li> </ul>	2
UNQUALIFIED	<ul> <li>bases treatment plan on faulty or inaccurate information</li> <li>misapplies theoretical model</li> <li>makes excessive and/or inappropriate referrals</li> </ul>	1
VERY UNQUALIFIED	<ul> <li>misapplies theoretical model resulting in harm to client</li> <li>develops a treatment plan that puts client at risk</li> <li>endangers client or others safety by making inappropriate referral</li> </ul>	0

#### MFCC Oral Examination Outlin€ontent Area IV

# **TREATMENT**

#### **DESCRIPTION**

This area assesses the candidate's ability to implement the objectives of the treatment plan. The candidate demonstrates this ability by evaluating and modifying clinical interventions throughout the course of treatment.



#### **DEFINITION**

The candidate implements the treatment plan by utilizing theoretically appropriate and client-specific clinical interventions for the case presented in the vignette. The candidate evaluates the treatment process by recognizing behavioral, emotional, and cognitive changes. The candidate modifies the treatment process by monitoring therapeutic progress.

### TASKS KNOWLEDGE OF:

- Provide feedback as client gains insight into own behavior to assist client to increase selfawareness
- ♦ Evaluate client's coping skills to determine timing of introduction of emotionally laden issues
- Identify patterns of resistance in therapy to assist client to recognize emotional barriers to ◊ treatment
- Develop strategies for coping with anxietyproducing situations to assist client to gain a sense of control
- ◆ Assist client to establish limits in relationship s♦ with others by identifying areas where boundaries have been violated ♦
- ◆ Improve parenting skills by educating parents ♦ about the developmental needs of children ♦
- Develop a plan for termination with client to provide a transition from treatment

- ♦ Reframing techniques
- ♦ Effects of family history, as demonstrated by genograms, family mapping, and structural diagrams, on current family dynamics
- ♦ Communication techniques such as use of "I" statements and reflective listening to develop personal responsibility and minimize blame
- Strategies to develop therapeutic boundaries
- ♦ Techniques to address client's expectations of therapy
- ♦ Strategies to provide empathic feedback regarding client's behavior
- ♦ Strategies for stress management
  - Strategies to assist client to develop a sense of control
- ♦ How previously violated boundaries can affect client's current relationships
- Methods to improve parenting skills
- ♦ Cognitive, physical, emotional, behavioral, and social stages of development
- ♦ Issues related to the process of termination

#### SUMMARY OF STANDARDIZED QUESTIONS

Questions will be asked regarding interventions and termination issues that might arise in the case presented in the vignette.

# Summary of Evaluation System Behavioral Anchors IV. TREATMENT

RATING	DESCRIPTION OF CANDIDATE'S RESPONSE	POINTS
EXCEPTIONAL	<ul> <li>provides sophisticated and creative interventions consistent with treatment plan and theory</li> <li>adapts interventions according to subtle changes in the therapeutic process</li> </ul>	n <b>5</b>
SKILLED	<ul> <li>provides a range of interventions consistent with treatment plan and theory</li> <li>provides in-depth rationale for interventions chosen in the progression of therapy</li> </ul>	4
SUFFICIENT	<ul> <li>provides interventions consistent with treatment plan, treatment phase, and theory</li> <li>details the use and goal of appropriate interventions</li> <li>revises goals and interventions based on changing clinical needs</li> </ul>	
DEFICIENT	<ul> <li>applies interventions inconsistent with treatment plan, treatment phase, and/or theory</li> <li>uses techniques or interventions in a superficial and limited manner</li> <li>lists interventions without application to the vignette</li> </ul>	2
UNQUALIFIED	<ul> <li>shows lack of clinical skills and counseling techniques</li> <li>applies interventions that are insensitive to client's needs</li> </ul>	1
VERY UNQUALIFIED	<ul> <li>applies interventions that put client or others in danger</li> <li>uses unprofessional interventions</li> </ul>	0

## MFCC Oral Examination Outline Content Area V

# **HUMAN DIVERSITY**

#### **DESCRIPTION**

This area assesses the candidate's ability to respond to clinical issues with respect to gender, age, culture, sexual orientation, spiritual values, and other issues of diversity.



#### **DEFINITION**

The candidate considers the influence of diversities throughout the treatment process and manages biases that impact the therapeutic relationship.

#### **TASKS KNOWLEDGE OF:** ◆ Determine culturally sensitive methods to evaluate ◊ Effects of client's age, culture, gender, and spiritual individuals from minority populations beliefs on the choice of treatment ♦ Develop treatment strategies within the context of Cultural issues which may affect the therapeutic client's culture to provide therapy consistent with client's values and beliefs The impact of the client's and therapist's gender on • Develop therapeutic techniques consistent with the therapeutic alliance client's generational values The impact of client's and therapist's spiritual ♦ Assess client's perception of presenting problem values on the therapeutic alliance within context of client's gender, socialization, Cultural issues regarding discipline, developmental culture, age, and spiritual beliefs issues, and family norms ◆ Provide an unbiased therapeutic environment when ◊ The impact of client's spiritual beliefs on client's values or beliefs are different from therapeutic process therapist's The impact of the aging process on therapy ♦ Assist client in dealing with issues related to sexual ◊ Emotional stress associated with discrimination orientation by applying therapeutic techniques The impact of loss, illness, and lack of support consistent with client's sexual value system systems for gay and lesbian clients

#### SUMMARY OF STANDARDIZED QUESTIONS

Questions will be asked regarding the human diversity issues in the case presented in the vignette and the connection of those issues to the therapeutic process.

# Summary of Evaluation System Behavioral Anchors V. HUMAN DIVERSITY

RATING	DESCRIPTION OF CANDIDATE'S RESPONSE	POINTS
EXCEPTIONAL	<ul> <li>recognizes subtle diversity issues</li> <li>demonstrates a comprehensive understanding of the dynamics of human diversity issues and their impact on the therapist/client relationship</li> </ul>	5
SKILLED	<ul> <li>manages the impact of the therapist's personal biases and values on the counseling process</li> <li>demonstrates thorough understanding of diversity issues</li> <li>demonstrates in-depth knowledge of the impact of diversity issues on therapist/client relationship</li> </ul>	4
SUFFICIENT	<ul> <li>identifies relevant diversity factors in the case</li> <li>demonstrates basic knowledge of the impact of diversity issues on therapist/client relationship</li> </ul>	3
DEFICIENT	<ul> <li>minimizes the importance of diversity issues</li> <li>lacks awareness of the impact of diversity issues on the therapist/client relationship</li> </ul>	2
UNQUALIFIED	<ul> <li>misunderstands the impact of diversity issues on the therapist/client relationship</li> <li>omits key diversity issues</li> <li>lacks awareness of therapist personal bias</li> </ul>	1
VERY UNQUALIFIED	<ul> <li>endangers client by disregarding diversity issues</li> <li>endangers client by expressing insensitivity to diversity issues</li> </ul>	0

#### MFCC Oral Examination Outline Content Area VI

# LAW

#### **DESCRIPTION**

This area assesses the candidate's ability to apply legal standards to professional judgments in clinical practice to ensure consumer protection.



## **DEFINITION**

The candidate recognizes and integrates legal standards in the treatment process based on the vignette.

#### **TASKS KNOWLEDGE OF:** • Provide information regarding fees at the onset of therapy Laws pertaining to mandated reporting of • Obtain client's authorization for release to disclose or obtain confidential information Legal statutes regarding disclosure of fees • Maintain security of client or therapy records for therapy ♦ Adhere to legal statutes regarding sexual intimacy with Situations requiring distribution of the Board of Behavioral Sciences' pamphlet client entitled "Professional Therapy Never • Adhere to legal statutes regarding the need for consent to Includes Sex" treat a minor Statutes regarding consent to treat a ◆ Report to authorities cases of abuse as defined by mandated◊ reporting requirements minor • Report to authorities cases of potential harm to client or Statutes regarding holder of privilege Statutes regarding limits of confidentiality others as defined by mandated reporting requirements

#### **SUMMARY OF STANDARDIZED QUESTIONS**

Questions will be asked regarding the identification and clinical management of the therapist's legal obligations the case presented in the vignette.

# Summary of Evaluation System Behavioral Anchors VI. LAW

RATING	DESCRIPTION OF CANDIDATE'S RESPONSE	POINTS
EXCEPTIONAL	<ul> <li>demonstrates knowledge of complex and subtle legal obligation</li> <li>demonstrates sophisticated ability to manage complex legal obligations within the context of treatment</li> </ul>	s <b>5</b>
SKILLED	<ul> <li>presents thorough assessment of legal obligations in the case</li> <li>describes thorough and effective strategies to manage legal obligations</li> </ul>	4
SUFFICIENT	<ul> <li>recognizes relevant legal obligations in the case</li> <li>demonstrates basic management of legal obligations</li> <li>recognizes impact of legal obligations on the treatment process</li> </ul>	3
DEFICIENT	<ul> <li>demonstrates incomplete or superficial knowledge of legal obligations</li> <li>demonstrates incomplete or superficial management of legal obligations</li> </ul>	2
UNQUALIFIED	<ul> <li>lacks knowledge of legal obligations</li> <li>lacks skill in managing legal obligations</li> <li>omits key legal obligations in discussion of the case</li> </ul>	1
VERY UNQUALIFIED	<ul> <li>uses interventions that are outside scope of practice or competence</li> <li>endangers clients and others by ignoring or misunderstanding legal obligations</li> </ul>	0

#### MFCC Oral Examination Outline Content Area VII

# **ETHICS**

#### **DESCRIPTION**

This area assesses the candidate's ability to apply ethical principles to professional judgments in clinical practice.



#### **DEFINITION**

The candidate recognizes and integrates ethical principles in the treatment process and in professional relationships, based on the vignette.

#### **TASKS KNOWLEDGE OF:** • Evaluate impact of countertransference throughout the therapeutic Implications of physical contact within the context process to keep therapy focused on client • Maintain professional boundaries to protect the welfare of client and of therapy Ethical standards of therapist practice • Obtain consultation of other professionals to deal with therapeutic issues which may impair ability to provide services Social interactions that may • Identify situations which evoke personal reactions that would interfere constitute dual relationships with the therapeutic process Business interactions that • Avoid entering into business or social relationships with clients to may constitute dual relationships preclude formation of dual relationships Personal limitations that ◆ Obtain client's informed consent for treatment by providing client with ◊ sufficient information about the therapeutic process require outside consultation • Inform client of parameters of confidentiality and conditions of mandated reporting

### **SUMMARY OF STANDARDIZED QUESTIONS**

Questions will be asked regarding the identification and handling of the therapist's ethical responsibilities in the case presented in the vignette.

# Summary of Evaluation System Behavioral Anchors VII. ETHICS

RATING	DESCRIPTION OF CANDIDATE'S RESPONSE	POINTS
EXCEPTIONAL	<ul> <li>demonstrates knowledge of complex and subtle ethical responsibilities</li> <li>creatively integrates the management of subtle ethical responsibilities into treatment</li> </ul>	5
SKILLED	<ul> <li>presents thorough assessment of ethical responsibilities in the case</li> <li>describes thorough and effective strategies to manage ethical responsibilities</li> </ul>	4
SUFFICIENT	<ul> <li>recognizes relevant ethical responsibilities in the case</li> <li>demonstrates basic management of ethical responsibilities</li> <li>recognizes impact of ethical responsibilities on the treatment process</li> </ul>	3
DEFICIENT	<ul> <li>demonstrates incomplete or superficial knowledge and/or management of ethical responsibilities</li> <li>presents ethical responsibilities irrelevant to the case</li> </ul>	2
UNQUALIFIED	<ul> <li>lacks knowledge of ethical responsibilities</li> <li>lacks skill in managing ethical responsibilities</li> <li>omits key ethical responsibilities in discussion of the case</li> </ul>	1
VERY UNQUALIFIED	<ul> <li>uses interventions that are outside scope of competence</li> <li>harms clients and others by ignoring or misunderstanding ethica responsibilities</li> </ul>	<b>0</b>

## 8. BOARD POLICIES

## **Eligibility**

You must obtain a passing score on the written examination prior to the oral examination final filing date in order to be eligible to participate in the next oral examination cycle. Once you are notified that you are eligible to take the oral examination, you must participate in the oral examination within one year.

The Board considers your application bandoned if you fail to participate in the oral examination within one year after being notified of eligibility. This process is in accordance with the California Code of Regulations, Title 16, Sections 1806 (c) and 1833.3. In the event of abandonment, you would be required to submit a new application and fee and meet all current requirements, if you are still interested in obtaining a license.

# Incomplete Examination

Candidates who report to the oral examination must complete the examination. Withdrawal from the examination after it has commenced or failure to attempt to answer the examination questions will result in an "incomplete examination." An incomplete examination is considered nonparticipation and could affect a candidate's future eligibility. See the above section entitled "Eligibility" for more information.

#### **No Show Policy**

If you cannot attend the oral examination on the scheduled date, or if you withdraw from the examination after it has commenced (resulting in an incomplete examination), you will be considered **no show**. Eligible candidates must submit a Request for Re-Examination with a reexamination fee by the next final filing date in order to participate in the next scheduled examination cycle.

### Scheduling

Your oral examination will be scheduled at the location you specified on the Personal Data Card in your application packet. Your location preference is entered into a computer system that randomly and automatically performs examination scheduling.

The Board begins scheduling candidates for the oral examination two weeks after the oral examination's final filing date. If, after becoming eligible for the oral examination, you are not able to attend any of the scheduled examination dates, you must submit written notification to the Board no later than two weeks after the oral examination's final filing date. The Board may then apply your fee to the following oral

examination cycle. Candidates who fail to participate in the examination

once they have been scheduled shall forfeit their examination fee.

# The date, time, and location of your oral examination cannot be changed.

The Board will only consider a candidate's request for a specific scheduled date for the following reasons:

- a) When your religious beliefs prohibit you from attending a scheduled examination date (before the final filing date, you must inform the Board of your request to be excluded from scheduling on a certain day or date); or,
- b) when Board error initially prevented you from being scheduled.

# **Special**

The Board grants requests for special accommodations in accordance with **Accommodations** the Americans with Disabilities Act of 1990. All examination locations are accessible to persons with disabilities. As stated in the pplication for State License as a Marriage, Family, and Child Counselonal requests and substantiating documentation must be submitted with a complete application (or aRequest for Re-Examination) by the final filing date of the examination.

> Requests for special accommodations must be submitted wielach Application for State License as a Marriage, Family, and Child Counselor or Request for Re-Examination in order to be considered.

## Americans with **Disabilities Act**

The California Board of Behavioral Sciences does not discriminate on the basis of disability in employment or in the admission and access to its programs and activities. An Americans with Disabilities Act (ADA) Coordinator has been designated to coordinate and carry out this agency's compliance with the nondiscrimination requirements of Title II of the ADA. Information concerning the provisions of the ADA, and the rights provided thereunder, is available from the ADA Coordinator at the Board.

## **Notice of** Admittance

A *Notice of Admittance* for the oral examination will be mailed to you no later than two weeks prior to the first scheduled oral examination date. You will be asked to present this notice when you register at the oral examination site on the day of your examination.

# 9. THE ORAL EXAMINATION PROCESS

## What to Bring to the Examination

You must present official photographic identification, such as a DMV identification or license, and Notice of Admittance when you register at the examination site.

## If you do not have official photographic identification, you will not be allowed to participate in the examination

Radios, cassette recorders, and study materials are not allowed in the registration or examination rooms. We ask that you not bring handbags, briefcases, and other large personal belongings into the examination room. If you bring large personal belongings into the examination room, you will be asked to place these belongings away from the examination table.

Candidates may bring a clipboard to assist with note-taking during the oral examination.

# Arrival at the

When you arrive at the examination site, report to the registration room. **Examination Site** The registration room's name or number will be posted at the site.

> When you enter the registration room to sign in, you must present official photographic identification and youNotice of Admittance. If you have misplaced your *Notice of Admittance*, ask the proctor to confirm your appointment from a list of candidates provided by the Board.

If you arrive later than the scheduled time listed on youNotice of Admittance, we may be unable to grant you admission to the examination

You will be provided with paper for taking notes during the examination. These notes will be retained by your examiners.

# **Examination** Security and Confidentiality

Examination proctors will monitor the examination site to assist in maintaining the confidentiality of examination content.

When you register at the examination site, you will be required to sign an MFCC Oral Examination Confidentiality Agreement and Check-Out Form. This form contains information derived from Sections 123, 123.5, 496, and 584 of the Business and Professions Code which are presented in their entirety on pages 32-34 of this handbook.

Section 123 makes it a misdemeanor for any person to subvert or attempt

## **Chapter 9: The Oral Examination Process**

to subvert any licensing examination or the administration of a licensing examination. Violation of this section will result in disqualification from the examination. A person found guilty of these actions is liable for the actual damages sustained by the Board, not to exceed \$10,000, and the costs of litigation. In addition, the Board may initiate administrative action to deny issuance of a license. An outline of the confidentiality agreement you are required to sign is presented on the following page.

# ORAL EXAMINATION SECURITY/CONFIDENTIALITY

Oral examination candidates are required to sign an agreement based on Business and Professions Code Sections 123, 123.5, 496, and 584, which prohibit candidates from:

- permitting an impersonator to take the examination on behalf of the candidate;
- impersonating another person in order to take the examination on that person's behalf;
- communicating examination content to any person other than examination staff:
- reproducing examination materials or providing notes of examination content to other candidates or individuals associated with examination preparatory courses, seminars, or workshops; and,
- obstructing the administration of the examination.

Violation of the confidentiality agreement or any of the verbal directives of the test administrator may result in:

- disqualification from the examination;
- denial of a license; and/or,
- liability for the actual damages sustained by the Board, not to exceed ten thousand dollars (\$10,000), and the costs of litigation.

# CALIFORNIA BUSINESS AND PROFESSIONS CODE

## DIVISION 1, CHAPTER 1, SECTION 123:

It is a misdemeanor for any person to engage in any conduct which subverts or attempts to subvert any licensing examination or the administration of an examination, including, but not limited to:

- a) Conduct which violates the security of the examination materials; removing from the examination room any examination materials without authorization; the unauthorized reproduction by any means of any portion of the actual licensing examination; aiding by any means the unauthorized reproduction of any portion of the actual licensing examination; paying or using professional or paid examination-takers for the purpose of reconstructing any portion of the licensing examination; obtaining examination questions or other examination material, except by specific authorization either before, during, or after an examination; or using or purporting to use any examination questions or materials which were improperly removed or taken from any examination for the purpose of instructing or preparing any applicant for examination; or selling, distributing, buying, receiving, or having unauthorized possession of any portion of a future, current, or previously administered licensing examination.
- b) Communicating with any other candidate during the administration of a licensing examination; copying answers from another examinee or permitting one's answers to be copied by another examinee; having in one's possession during the administration of the licensing examination any books, equipment, notes, written or printed materials, or data of any kind, other than the examination materials distributed, or otherwise authorized to be in one's possession during the examination; or impersonating any examinee or having an impersonator take the licensing examination on one's behalf.

Nothing in this section shall preclude prosecution under the authority provided for in any other provision of law.

In addition to any other penalties, a person found guilty of violating this section, shall be liable for the actual damages sustained by the agency administering the examination not to exceed ten thousand dollars (\$10,000) and the costs of litigation.

c) If any provision of this section or the application thereof to any person or circumstances is held invalid, that invalidity shall not affect other provisions or applications of the section that can be given effect without the invalid provision or application, and to this end the provisions of this section are severable.

# CALIFORNIA BUSINESS AND PROFESSIONS CODE (CONTINUED)

### DIVISION1, CHAPTER1, SECTION123.5:

Whenever any person has engaged, or is about to engage, in any acts or practices which constitute, or will constitute, a violation of Section 123, the superior court in and for the county wherein acts or practices takes place, or are about to take place, may issue an injunction, or other appropriate order, restraining such conduct on application of a board, the Attorney General or the district attorney of the county.

The proceedings under this section shall be governed by Chapter 3 (commencing with Section 525) of Title 7 of Part 2 of the Code of Civil Procedure.

The remedy provided for by this section shall be in addition to, and not a limitation on, the authority provided for in any other provision of law.

## DIVISION 1.5, CHAPTER 5, SECTION 496:

A board may deny, suspend, revoke, or otherwise restrict a license on the ground that an applicant or licensee has violated Section 123 pertaining to subversion of licensing examinations.

#### DIVISION2, CHAPTER1, ARTICLE4, SECTION584:

No person shall violate the security of any examination, as defined in subdivision (a) of Section 12 or impersonate, attempt to impersonate, or solicit the impersonation of, another in any examination a license, certificate, or registration to practice as provided in this division, the Osteopathic Initiati Act, or the Chiropractic Initiative Act, or under any other law providing for the regulation of any c system or method of treating the sick or afflicted in this state.

## Assignment to an Examination Panel

The proctors will assign you to an panel of two oral examiners as soon as a panel becomes available. Examiners are prohibited from examining any individual they know. If an examiner recognizes you, you will be returned to the registration room and assigned to another panel. Every attempt will be made to ensure that you are reassigned within a reasonable amount of time. Conversely, if you recognize a member of the examining panel, request examination by a different panel before the examination begins.

If you are being re-examined, you are advised to refrain from mentioning participation in previous oral examinations. If you inadvertently mention previous participation in an oral examination once your examination has commenced, you wilhot be reassigned to a different panel.

Oral examiners are trained to present a pleasant, business-like demeanor to candidates. Candidates are to refrain from mentioning any personal information to their examiners.

# Commencement of the Examination

You will be escorted from the registration room to the examination room by one of the members of your examining panel who will introduce you to the other member. If you have brought any large personal belongings such as a briefcase or a handbag into the examination room, you will be asked to place these belongings away from the examination table.

The introductions will be tape recorded and will signify the commencement of the oral examination. Upon completion of the introductions, the tape recorder will be stopped and tested to ensure that it is in proper working condition.

# The Vignette and Standardized Questions

You will be asked to read the vignette aloud in the presence of the examining panel. If the examiners believe that you have misread the vignette, they may ask you to reread it. You will then have seven minutes to review the vignette and take notes. At the conclusion of the sevenminute period, the panel will begin to ask the set of standardized questions.

### Check-Out

At the end of the examination, you must complete the FCC Oral Examination Confidentiality Agreement and Check-Out Form By signing this form, you acknowledge full understanding of your responsibility to maintain the security and confidentiality of the oral examination.

The MFCC Oral Examination Confidentiality Agreement and Check-Out Form must be returned to the proctors at a designated location after you have finished the examination. You may be asked to fill out a questionnaire which provides the Board with your anonymous feedback about the examination. Completion of this questionnaire is voluntary.

## 10. AFTER THE ORAL EXAMINATION

# Notification of Results

The Board will make every effort to notify you of your test results within six weeks of the last scheduled oral examination date. During this period, the examination will be scored and evaluated by the Department of Consumer Affairs' Office of Examination Resources. The scores are entered into a computer system which produces the notifications of pass, failure, no-show, or abandonment of application. The notification of failure letter provides the candidate's score in each content area as well as the overall score.

If you have**not** received your results after seven weeks from the last scheduled oral examination date, write a letter to the Board to request a duplicate copy of your examination results. Your correspondence should include your name, address, and Board file number.

Examination results are confidential and will not be released over the telephone

# Change of Address

If you change your mailing address, you must send a change of address form to notify the Board. Allow 30 days for the change to take effect. The Board discourages requests for changes of address over the telephone, and is not responsible for any changes made over the telephone.

# If You Pass the Examination

An initial license fee is required prior to issuance of a license. Examination results will include information regarding the initial license fee. This fee will not exceed \$180.00 and will be prorated and established according to the issuance and expiration date of your license.

Title 16, California Code of Regulations section 1806(d) states that an application shall be deemed abandoned if the applicant fails to pay the initial license fee within one year after notification by the Board of successful completion of examination requirements. An application submitted subsequent to the abandonment of a prior application shall be treated as a new application.

#### **Examination**

*Examination* and submit the required re-examination fee by the final filing date published by the Board. You must retake the examination within one year of failing a previous examination or your application will be considered abandoned.

The Board begins scheduling candidates for the oral examination two weeks after the oral examination's final filing date. If, after submitting your *Request for Re-Examination*, you are not able to attend any of the scheduled examination dates, you must submit written notification to the Board no later than two weeks after the oral examination's final filing date. The Board may then apply your fee to the following oral examination cycle. Candidates who fail to participate in the examination once they have been scheduled shall forfeit their examination fee.

# Examination Appeals

Title 16 of the California Code of Regulations, Section 1815 (presented in its entirety on page 39) specifies the requirements for appealing the results of an oral examination. All candidates appealing an oral examination will be notified of the outcome of their appeal approximately 60 days after the appeal deadline. Depending on the outcome of the appeal, the reexamination fee may be refunded. The following chapter of this handbook answers commonly asked questions about the appeal process.

# Review of Audiotape

A request to review the audiotape recording of your oral examination must be received in writing and must be accompanied by the appeal fee. A form will be provided for your use in submitting your appeal request. If you choose **not** to file an appeal after hearing the audiotape, the fee **isot** refundable.

# Directions to the Board's Office

The review of the audiotape recording of your oral examination shall take place in Sacramento. Directions to the Board's office are provided on the following page.

(map)

# ORAL EXAMINATION APPEALS CALIFORNIA CODE OF REGULATIONS TITLE 16. SECTION 1815

- a) Any person who fails the oral examination may appeal such failure to the board upon payment of the fee prescribed by statute for rescoring the examination. The bases for an appeal shall be examiner misconduct, which means prejudice or bias evidenced by the statements and/or actions of an examiner, and/or examiner error regarding the competence of the examinee which negatively affects the outcome c the examination.
- b) All appeals and supporting documentation must be filed with the board within 30 days from the date on which the results of the examination were mailed. An appear shall be in writing and the applicant shall set forth the ground for appeal and all of the specific facts or circumstances which constitute the basis for the appeal and how those facts or circumstances demonstrate examiner misconduct or error.
- c) In order to aid in the filing of an appeal, an examinee may review the tape recording of his or her examination within the 30-day period provided in subsection (b) above. The examinee may take written notes but shall not make or be permitted to make any reproduction of the tape. Such review shall occur only one time and shall be no longer than one hour in length. It shall take place in the board office at the time designated by the executive officer. Except as provided herein, examination materials shall not be released to or reviewed by any examinee.
- d) In order to be eligible for re-examination at the next scheduled examination, an applicant who is awaiting the results of an appeal must file an application for re-examination, together with a fee therefor, on or before the final filing date for that examination.
- e) An examinee will be notified in writing of the results of the appeal. In acting on appeals the board may take such action as it deems appropriate, including issuance of a license where the board determines that the examinee has demonstrated the required competence.

# 11. QUESTIONS AND ANSWERS ABOUT ORAL EXAMINATION APPEALS

Question: When is my appeal due to the Board and what is the appeal fee?

**Answer:** According to Title 16, California Code of Regulations, Section 1815, oral

examination appeals and supporting documentation must be filed with the Board

within 30 days from the date the results of the examination were mailed.

Appeals and supporting documentation postmarked after the 30-day period will **not** be accepted unless proof is provided that the results were mailed within 30 days from the date on which the examination results were mailed. Appeals

received without the \$100.00 appeal fee willot be processed.

Question: What is the procedure for reviewing the audiotape recording of the

oral examination?

**Answer:** Complete Part 1 of the *Request for Appeal of Oral Examination* form and submit

this written request to the Board at 400 R Street, Suite 3150, Sacramento, CA 95814-6240. Your appeal fee must accompany your written request. Requests will

**not** be taken by telephone.

Question: How will my audiotape review appointment be scheduled?

**Answer:** Upon receipt of the appeal fee and written request to review the audiotape, a

Board representative will contact you by telephone to schedule a date and time. Audiotape reviews are scheduled on a first come first served basis, so you are encouraged to submit your request as soon as possible. Audiotape reviews are scheduled in one hour increments. If you arrive late for your appointment you will only be allowed the remaining time in your scheduled time slot to review the

audiotape.

Question: May I bring someone with me to review the audiotape?

**Answer:** To safeguard examination security, no individuals (friend, supervisor, colleague,

husband/wife, friend, etc.) other than the candidate and a Board representative may be present at the time the audiotape is reviewed, with the sole exception of those candidates requesting the presence of their legal counsel. A written request for accompaniment by legal counsel must be received by the Board prior to the scheduled appointment to listen to the tape. The request must include the attorney's name, California State Bar license number, and a statement that the attorney is **neither** licensed by the Board nor as a psychologist, psychiatrist, or

psychotherapist.

Question: May I bring a tape recorder to my audiotape review?

**Answer:** No. To safeguard examination security, reproduction of an examination in any

form is prohibited. Candidates are also limited to taking notes regarding their answers and are**not** allowed to document any aspect of the examination verbatim. The Board representative may review notes taken by a candidate to ensure that no

confidential examination material has been transcribed.

Question: Am I required to review my audiotape in order to file an appeal?

**Answer:** No. The opportunity to review your audiotape is providednly as an aid in the

filing of an appeal, and will only be scheduled within 30 days from the date on

which the results of the examination were mailed.

Question: In what format should the appeal be?

**Answer:** If you do not pass the oral examination, you will receive an appeal request form

with your failure notice for your use in filing the appeal. While there is no required format for appeals, your must identify examples of the basis of the appeal, i.e., examiner misconduct, defined as prejudice or bias as evidenced by the statements and/or actions of an examiner, and/or examiner error regarding the competence of the examinee which negatively affected the outcome of the examination. You must also set forth the ground for appeal and all of the specific facts or circumstances which constitute the basis for the appeal and how those facts or circumstances

demonstrate examiner misconduct or error.

To assist in the decision to file an appeal, candidates may review the oral examination outline and evaluation system information provided in this handbook. This information will assist candidates in evaluating whether their responses could have resulted in ratings below Sufficient. This information may also assist candidates in writing their letter of appeal. For example, it may assist

## **Chapter 11: Questions and Answers About Oral Examination Appeals**

in documenting why a rating of Sufficient should have been received in an area in which the candidate was rated below Sufficient.

Documents not related to the examination (i.e., letters of recommendation, supervisor's statements, resumes, work experience) without be considered during the examination appeal review.

#### Question:

When will I know the results of my appeal? What happens when the original results of my oral examination are upheld or my appeal is granted?

### Answer:

Examination appeal results are mailed approximately 60 days after the appeal deadline. If you have submitted an appeal, you are encouraged to prepare for the next oral examination, as your appeal may be denied. Candidates who would like to participate in the next oral examination must complete and submi*Raquest for Re-Examination* form along with the correct fee by the final filing date.

If the original results of your examination are upheld, you will receive a letter stating that your appeal has been denied. While the Board's letter notifying you of the results of the appeal review will not specifically address individual points raised in your appeal letter, all will be taken into consideration at the time the review is performed. No additional information will be given regarding your examination or appeal results.

If your appeal is granted, you will be notified by a letter which will include information regarding the initial license fee. This fee will not exceed \$180.00 and will be prorated and established according to the issuance and expiration date of your license. Your re-examination fee, if submitted, will be reimbursed.

